Approved for use through 1/31/2007, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/732,726			ing Date 10/2003	To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY											
_	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A	1	N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A	1	N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =			1	x \$ =		OR	x \$ =	
	EPENDENT CLAIN CFR 1.16(h))	s	minus 3 =			1	x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	ngs exceed 100 on size fee due) for each on thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL										TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	11/21/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	* 23	Minus	** 20	= 3	1	X \$25 =	75	OR	x s =	
	Independent (37 CFR 1.16(b))	• 4	Minus	4	= 0	1	X \$105 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						•	TOTAL ADD'L FEE	75	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus	**	=		× \$ =		OR	x \$ =	
∑ O	Independent (37 CFR 1,16(h))		Minus	***	=		x \$ =		OR	x \$ =	
딟	Application Size Fee (37 CFR 1.16(s))										
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOTAL OR ADD'L FEE FEE											
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, orter "3". The "Highest Number Previously Paid For" (Total to rindependent) is the highest number found in the appropriate box in column 1. This collection of Information is required by 37 CFR 1.16. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to											

This conduction of information is required by a control of the conduction of regions of collabor of reduits a beside that the plant of the conduction of the ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.